A bill to be entitled

An act relating to civil liability for COVID-19related claims against certain healthcare entities;
creating s. 768.381, F.S.; providing legislative
findings and intent; defining terms; providing
requirements for a civil action based on a COVID-19related medical claim; providing requirements for a
civil action based on a COVID-19-related negligence
claim; providing severability; providing retroactive
application; providing an effective date.

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Be It Enacted by the Legislature of the State of Florida:

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Section 1. Section 768.381, Florida Statutes, is created to read:

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768.381 Liability protections for COVID-19-related claims against certain healthcare providers.—

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(1) The Legislature finds that the COVID-19 outbreak in the state threatens the continued viability of certain healthcare institutions and other entities that serve the overall well-being of the state. The threat of unknown and potentially unbounded liability to such institutions and entities, in the wake of a pandemic that has already left many of these institutions vulnerable, has created an overpowering

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public necessity to provide an immediate and remedial

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legislative solution. Therefore, the Legislature intends for these institutions and entities to enjoy heightened protections against certain types of civil liability as a result of the COVID-19 pandemic. The Legislature also finds that there are no alternative means to meet this public necessity, especially in light of the sudden, unprecedented nature of the COVID-19 pandemic. The Legislature finds the public interest as a whole is best served by providing relief to these institutions and entities so that they may remain viable and continue to serve the state.

- (2) As used in this section, the term:
- (a) "COVID-19" means the novel coronavirus.
- (b) "COVID-19-related medical claim" means a tort claim arising under chapter 400, 429, or 766, which is based on the defendant's breach of the applicable standard of care or duty of care, and which breach:
 - 1. Caused a person to contract COVID-19;
- 2. Arose from the defendant's delay or omission in performing a surgical procedure, which delay or omission was directly caused by the COVID-19 pandemic; or
- 3. Arose from the defendant's act or omission with respect to an emergency medical condition as defined in s. 395.002(8), and which act or omission was the result of a lack of resources directly caused by the COVID-19 pandemic.

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- 5. Arose from the defendant's provision of treatment to a patient diagnosed with COVID-19 whose injuries were directly related to an exacerbation of the patient's pre-existing conditions by COVID-19.
- (c) "COVID-19-related negligence claim" means a tort claim brought against a healthcare provider not arising under chapter 400, 429, or 766, which is based on the defendant's breach of the applicable duty of care which caused a person to contract COVID-19.
 - (d) "Healthcare provider" means:
 - 1. A provider as defined in s. 408.803.
- 2. A clinical laboratory providing services in the state or services to health care providers in the state, if the clinical laboratory is certified by the Centers for Medicare and Medicaid Services under the federal Clinical Laboratory

 Improvement Amendments and the federal rules adopted thereunder.
- 3. A federally qualified health center as defined in 42 U.S.C. s. 1396d(1)(2)(B), as that definition exists on the effective date of this act.
- 4. Any site providing health care services which was established for the purpose of responding to the COVID-19 pandemic pursuant to any federal or state order, declaration, or

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- 5. A health care practitioner as defined in s. 456.001.
- 6. A health care professional licensed under part IV of chapter 468.
 - 7. A home health aide as defined in s. 400.462(15).
- 8. A provider licensed under chapter 394 or 397 and its clinical and non-clinical staff providing inpatient or outpatient services.
 - 9. A continuing care facility licensed under chapter 651.
 - 10. A pharmacy permitted under chapter 465.
 - (3) With respect to a COVID-19-related medical claim:
- (a) It is an affirmative defense that the defendant complied with government-issued health standards or guidance in effect at the time the cause of action accrued.
- (b) The factfinder must consider all relevant surrounding circumstances, including any relevant effects of the COVID-19 pandemic, in determining the appropriate standard of care.
- (c) A defendant is not liable for any act or omission unless such act or omission constitutes gross negligence as defined in s. 768.72(2)(b), recklessness, or intentional misconduct as defined in s. 768.72(2)(a).
 - (4) With respect to a COVID-19-related negligence claim:
 - (a) The complaint must be pled with particularity.
- (b) At the same time the complaint is filed, the plaintiff must submit an affidavit signed by a physician actively licensed

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in the state which attests to the physician's belief, within a reasonable degree of medical certainty, that the plaintiff's COVID-19-related damages, injury, or death occurred as a result of the defendant's acts or omissions.

- (c) The court must determine, as a matter of law, whether:
- 1. The plaintiff complied with paragraphs (a) and (b). If the plaintiff did not comply with paragraphs (a) and (b), the court must dismiss the action without prejudice.
- 2. The defendant made a good faith effort to substantially comply with any authoritative or controlling government-issued health standards or guidance at the time the cause of action accrued.
- <u>a. During this stage of the proceeding, admissible</u>

 <u>evidence is limited to evidence tending to demonstrate whether</u>

 the defendant made such a good faith effort.
- b. If the court determines that the defendant made such a good faith effort, the defendant is immune from civil liability.
- c. If the court determines that the defendant did not make such a good faith effort, the plaintiff may proceed with the action. However, absent at least gross negligence proven by clear and convincing evidence, the defendant is not liable for any act or omission relating to a COVID-19-related negligence claim.
- (d) The burden of proof is upon the plaintiff to demonstrate that the defendant did not make a good faith effort

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under subparagraph (c) 2.

- (e) The factfinder must consider all relevant surrounding circumstances, including any relevant effects of the COVID-19 pandemic, in determining the appropriate standard of care.
- (5) A plaintiff must commence a civil action for a COVID-19-related medical claim or a COVID-19-related negligence claim within 1 year after the cause of action accrues or within 1 year of the effective date of this act if the cause of action accrued before the effective date of this act.
- Section 2. If any provision of this act or its application to any person or circumstance is held invalid, the invalidity does not affect other provisions or applications of the act which can be given effect without the invalid provision or application, and to this end the provisions of this act are severable.
- Section 3. This act shall take effect upon becoming a law and shall apply retroactively. However, the provisions of this act shall not apply in a civil action against a particularly named defendant which is commenced before the effective date of this act.
- Section 4. This act is repealed one year and a day from the date of becoming a law, unless reenacted by the Legislature.

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